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**CONFIDENTIAL ATTORNEY-CLIENT  
PRIVILEGED COMMUNICATION**Date: **MARCH 4, 2004**

To: EXAMINER LAWRENCE BARANYAI  
U.S. PATENT AND TRADEMARK OFFICE  
Fax #: (703) 872-9314

From: DARRIN WESLEY HARRIS  
Fax #: (847) 905-7111

Client/Matter No.: **GB 000003 (7790/336)**

# of Pages: **15**  
(including cover sheet)

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## TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

|                      |                      |
|----------------------|----------------------|
| Attorney Docket No.  | GB 000003 (7790/336) |
| Application Number   | 09/631,353           |
| Filing Date          | AUGUST 2, 2000       |
| First Named Inventor | TIMOTHY J. MOULSLEY  |
| Group Art Unit       | 2665                 |
| Examiner             | BARANYAI, LAWRENCE   |

### ENCLOSURES (check all that apply)

|                                                                                                  |                                                                                                                                                                                                                                                                                                              |                                                                                            |
|--------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------|
| <input checked="" type="checkbox"/> Response to a Non-Final Office Action Dated December 4, 2003 | <input type="checkbox"/> Assignment Papers (for an Application)                                                                                                                                                                                                                                              | <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences        |
| <input type="checkbox"/> After Final                                                             | <input type="checkbox"/> Drawings:                                                                                                                                                                                                                                                                           | <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) |
| <input type="checkbox"/> Affidavits/declaration(s)                                               | <input type="checkbox"/> After Allowance Communication to Group                                                                                                                                                                                                                                              | <input type="checkbox"/> Proprietary Information                                           |
| <input type="checkbox"/> Status Letter                                                           | <input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition                                                                                                                                                                                                                         | <input type="checkbox"/> Post Card Receipt                                                 |
| <input type="checkbox"/> Petition for Extension of Time Request (duplic)                         | <input type="checkbox"/> To Convert a Provisional Application                                                                                                                                                                                                                                                | <input type="checkbox"/> Additional Enclosure(s) (please identify below):                  |
| <input type="checkbox"/> Express Abandonment Request                                             | <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address                                                                                                                                                                                                                      | <input type="checkbox"/>                                                                   |
| <input type="checkbox"/> Information Disclosure Statement, PTO-1449, art                         | <input type="checkbox"/> Terminal Disclaimer                                                                                                                                                                                                                                                                 | <input type="checkbox"/>                                                                   |
| <input type="checkbox"/> Certified Copy of Priority Document(s)                                  | <input type="checkbox"/> Small Entity Statement                                                                                                                                                                                                                                                              | <input type="checkbox"/>                                                                   |
| <input type="checkbox"/> Response to Missing Parts/ Incomplete Application                       | <input type="checkbox"/> Request of Refund                                                                                                                                                                                                                                                                   | <input type="checkbox"/>                                                                   |
|                                                                                                  | <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account No. 50-1713. A duplicate copy of this sheet is enclosed.                                                                                   |                                                                                            |
|                                                                                                  | <input checked="" type="checkbox"/> I hereby petition under 37 CFR § 1.136(a) for any extension of time required to ensure that this paper is timely filed. Please charge any associated fees which have not otherwise been paid to Deposit Account No. 50-1713. A duplicate copy of this sheet is enclosed. |                                                                                            |

### CALCULATION OF FEE

|                                           | Claims After Amendment |       | Highest No. Previously Paid For | Present Extra | Small Entity    |           | Large Entity    |           |
|-------------------------------------------|------------------------|-------|---------------------------------|---------------|-----------------|-----------|-----------------|-----------|
|                                           |                        |       |                                 |               | Rate            | Add'l Fee | Rate            | Add'l Fee |
| Total                                     |                        | Minus |                                 | 0             | x \$9=          | 0         | x \$18=         |           |
| Indep.                                    |                        | Minus |                                 | 0             | x \$43          | 0         | x \$86          |           |
| First Presentation of Multiple Dep. Claim |                        |       |                                 |               | +\$145          | —         | +\$290=         |           |
|                                           |                        |       |                                 |               | total add'l fee | \$ 0      | total add'l fee | \$        |

### SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name  
DARRIN WESLEY HARRIS  
Registration No. 40,636  
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Signature

Date: March 4, 2004

### CERTIFICATE OF FACSIMILE

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March 4, 2004

Signature

DARRIN WESLEY HARRIS (40,636)

Date: March 4, 2004

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(317) 595-0993

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DARRIN WESLEY HARRIS (40.636)  
Name of applicant, assignee or registered representative  
D.W.H.

Signature

March 4, 2004  
Date of Signature

PATENT  
Case No. **GB 000003**  
(7790/336)

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re patent application of: )  
TIMOTHY J. MOULSLEY )  
Serial No.: 09/631,353 )  
Filed: AUGUST 2, 2000 )  
For: RADIO COMMUNICATION )  
SYSTEM )  
Examiner: BARANYAI, L.  
Group Art Unit: 2665

**RESPONSE TO NON-FINAL OFFICE ACTION DATED DECEMBER 4, 2003**

Mail Stop Non-Fee Amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

In response to the Non-Final Office action of December 4, 2003, please amend  
the above referenced application as follows and reconsider the application in light of  
the following remarks.